

U.S. CONGRESSMAN MO BROOKS CONGRESSIONAL NOMINATION FORM



Class of 2027

*This application and supporting documents are **CONFIDENTIAL** and will be reviewed by Congressman Brooks, his nomination advisory board, and his staff*

THIS FORM MUST BE TYPED

GENERAL INFORMATION

Full Name: _____
(First) (Middle) (Last) (Preferred Name)

Home Address: _____
(Street) (City) (State) (Zip Code)

Email Address: _____ Date of Birth: _____ / _____ / _____

Cell Phone: (_____) _____ Hometown Newspaper: _____

Are you a U.S. citizen? ☐ Yes ☐ No Gender: ☐ Male ☐ Female

I have also applied to the following sources for a nomination:

☐ Sen. Richard Shelby ☐ Sen. Tommy Tuberville ☐ President Joe Biden ☐ VP Kamala Harris

SERVICE ACADEMY PREFERENCE

Please rank academies in order of preference, first to last. Rank only academies to which you have applied.

Note: The U.S. Coast Guard Academy is not listed because it does not require a congressional nomination.

_____ U.S. Air Force Academy _____ U.S. Military Academy

_____ U.S. Merchant Marine Academy _____ U.S. Naval Academy

Have you previously applied for or received a nomination from Congressman Brooks? ☐ Yes ☐ No

If yes, what year and what service academy? _____

Have you been contacted directly by an academy or received a Letter of Assurance or Letter of Encouragement?

☐ Yes ☐ No If yes, which academy (academies)? _____

SHORT ESSAY: In the space below, state in 50 words or less why you want to attend a service academy.

FAMILY INFORMATION

Name of parent(s)/legal guardian(s): _____
(Mother) (Father)

Mother's Cell Phone: (_____) _____ Father's Cell Phone: (_____) _____

Are you the child of an active or retired member of the U.S. military? [☐] Yes [☐] No

Are you the child of a deceased veteran, disabled veteran, prisoner of war, serviceman missing in action or Medal of Honor awardee? If yes, please specify: _____

Has a parent, grandparent or sibling attended a service academy? [☐] Yes [☐] No

(Name) (Relationship) (Service Academy) (Graduating Year)

(Name) (Relationship) (Service Academy) (Graduating Year)

EDUCATIONAL INFORMATION

High School Attended:

(High School Name) (Address) (City) (State) (Zip)

(_____) _____
(School Phone Number) (Guidance Counselor's Name)

Expected Date of Graduation (Month/Year): _____ / _____ High School GPA: _____

Class Rank: _____ / _____ students Class Percentage (Top % of Class): _____

SAT Scores: ERW _____ MTH _____

ACT Scores: MTH _____ ENG _____ RDG _____ SCI _____

Note: If you have taken more than one SAT/ACT test, enter highest section score and test date.

Have you attended any college classes? [☐] Yes [☐] No Currently Attending? [☐] Yes [☐] No

If yes, college attended:

(College/University Name) (Address) (City) (State) (Zip)

Date(s) Attended: _____ Major/Minor: _____

Credit Hours Earned: _____ Current GPA: _____ Number of Current Semester Hours: _____

MILITARY SERVICE/EXPERIENCE

Have you had any prior service with the military? [] Active [] Guard [] Reserve [] No

(Branch)

(Dates Served)

(Highest Rank)

Have you had any prior service in JROTC or Civil Air Patrol? [] Yes [] No

If yes, what is the highest rank achieved? _____

Have you attended any service academy summer programs? [] Yes [] No

If yes, which academy's program and when? _____

APPLICATION AGREEMENT

An appointment to a service academy is based on a desire by the candidate to devote a lifetime of military service and implies recognition by the appointee of an obligation to the government to devote themselves to a military career. Are you interested in an appointment on that basis? [] Yes [] No

Is it okay to use your name in a press release after receiving a nomination or appointment? [] Yes [] No

I hereby state that I am a U.S. citizen and legal resident of the 5th Congressional District of Alabama and certify that all information contained in this nomination application packet is true and correct to the best of my knowledge. Any changes to this information will be reported as soon as possible to Congressman Mo Brooks' Huntsville district office. Additionally, I understand that I will not be considered for a nomination if my required application packet documents are incomplete or not received by the **October 17, 2022 deadline, no later than 5:00 p.m. CST.**

(Full Name)

(Signature)

Date: _____ / _____ / _____

PICTURE

In the space below please adhere, using either tape or a paper clip, a recent color photo. Be sure to write your name on the back of the photo should it become detached during the review process.

